B1 (Official Form 1) (04/13)

Aaron, Brunell R.

Name of Debtor (if individual, enter Last, First, Middle):

All Other Names used by the Debtor in the last 8 years

(include married, maiden, and trade names):

Last four digits of Soc. Sec. or Individe (if more than one, state all): 784		D. (ITIN) /Com	plete EIN	Last four di	_		Taxpayer I.D.	(ITIN) /Complete EIN
Street Address of Debtor (No. & Stree 605 52nd St Sandusky, OH	t, City, State &	Zip Code):		Street Addi	ress of Jo	int Debtor (No. & Stre	eet, City, State	e & Zip Code):
Sandusky, On		ZIPCODE 448	370-4929	1			Z	IPCODE
County of Residence or of the Principa Erie	al Place of Busin	ness:		County of I	Residence	e or of the Principal Pla	ace of Busine	ss:
Mailing Address of Debtor (if differen	t from street add	dress)		Mailing Ad	ldress of	Joint Debtor (if differe	ent from stree	t address):
		ZIPCODE					Z	IPCODE
Location of Principal Assets of Busine	ss Debtor (if dif	ferent from str	eet address ab	ove):				
							Z	IPCODE
Type of Debtor			Nature of B	usiness		Chapter of B	ankruptcy C	ode Under Which
(Form of Organization)			(Check one	box.)		the Petitio	on is Filed (C	Check one box.)
(Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form Corporation (includes LLC and LLP Partnership Other (If debtor is not one of the about the content of the content of the about the content of the about the content of the	')	Health Ca Single As U.S.C. § Railroad Stockbrok Commodi	set Real Estat 101(51B) ker	e as defined in	n 11	☐ Chapter 7 ☐ Chapter 9 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	Recog Main Chapt Recog	er 15 Petition for gnition of a Foreign Proceeding er 15 Petition for gnition of a Foreign gain Proceeding
check this box and state type of enti		Clearing 1					Nature of D	
Chanton 15 Dakton		Other					(Check one b	
Chapter 15 Debtor Country of debtor's center of main into	erests:		Tax-Exempt			Debts are primari debts, defined in	11 U.S.C.	Debts are primaril business debts.
Each country in which a foreign proce regarding, or against debtor is pending		Debtor is Title 26 o	Check box, if a a tax-exempt of the United Stevenue Code	organization utates Code (th		§ 101(8) as "incur individual primari personal, family, of hold purpose."	ily for a	
Filing Fee (Check	one box)					Chapter 11 Debtor	rs	
Full Filing Fee attached			Check one l	oox:				
Filing Fee to be paid in installments	(Applicable to	individuals				or as defined in 11 U.S lebtor as defined in 11		
only). Must attach signed application	n for the court's		Check if:					
consideration certifying that the deb except in installments. Rule 1006(b)						quidated debts (excluding adjustment on 4/01/16 an		insiders or affiliates) are less ears thereafter).
Filing Fee waiver requested (Applic	able to chapter	7 individuals	Check all a	pplicable box	æs:			
only). Must attach signed application consideration. See Official Form 3B	n for the court's		Acceptan		n were so	olicited prepetition from	n one or more	e classes of creditors, in
Statistical/Administrative Informative Debtor estimates that funds will be Debtor estimates that, after any exedistribution to unsecured creditors.	available for di empt property is		nsecured credi				ole for	THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors								
				001				
1-49 50-99 100-199 200	1,000 5,000			.001- .000	25,001- 50,000	50,001- 100,000	Over 100,000	
Estimated Assets		10,00	25,		50,000		100,000	
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United States Bankruptcy Court

Northern District of Ohio

Voluntary Petition

Name of Joint Debtor (Spouse) (Last, First, Middle):

(include married, maiden, and trade names):

All Other Names used by the Joint Debtor in the last 8 years

\$50,000 \$100,000 \$500,000

Estimated Liabilities \checkmark

\$1 million

\$10 million

\$50,000 \$100,000 \$500,000 \$1 million \$10 million to \$50 million \$100 million

to \$50 million \$100 million

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1993-2011 EZ-Filing, Inc. [1

Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Aaron, Brunell R.	
All Prior Bankruptcy Case Filed Within Las	t 8 Years (If more than two, attac	h additional sheet)
Location Where Filed: None	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mor	re than one, attach additional sheet)
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition.	(To be completed whose debts are pr I, the attorney for the petitioner in that I have informed the petition chapter 7, 11, 12, or 13 of title explained the relief available under the complete of the complet	thibit B if debtor is an individual imarily consumer debts.) amed in the foregoing petition, declare er that [he or she] may proceed under le 11, United States Code, and have der each such chapter. I further certify notice required by 11 U.S.C. § 342(b).
	X /s/ Donald R. Harris	6/03/14
	Signature of Attorney for Debtor(s)	Date
or safety? ☐ Yes, and Exhibit C is attached and made a part of this petition. ✓ No Exhi	hit D	
(To be completed by every individual debtor. If a joint petition is filed, ea ▼ Exhibit D completed and signed by the debtor is attached and ma	ach spouse must complete and attach	ch a separate Exhibit D.)
If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached.	ed a made a part of this petition.	
	ng the Debtor - Venue	
(Check any approach of this petition or for a longer part of such 180		is District for 180 days immediately
☐ There is a bankruptcy case concerning debtor's affiliate, general		his District.
Debtor is a debtor in a foreign proceeding and has its principal pl or has no principal place of business or assets in the United States I in this District, or the interests of the parties will be served in reg	out is a defendant in an action or pro	oceeding [in a federal or state court]
Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of deb	licable boxes.)	
(Name of landlord that	at obtained judgment)	
(Address o	f landlord)	
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post	circumstances under which the de	
Debtor has included in this petition the deposit with the court of filing of the petition.	any rent that would become due du	ring the 30-day period after the
☐ Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(l)).	

Voluntary Petition	Name of Debtor(s): Aaron, Brunell R.
(This page must be completed and filed in every case)	Adion, Diunen K.
Signa	atures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
X /s/ Brunell R. Aaron	Signature of Foreign Representative
Signature of Debtor Brunell R. Aaron	
Signature of Joint Debtor	Printed Name of Foreign Representative
Telephone Number (If not represented by attorney)	Date
June 3, 2014	
Date	
Signature of Attorney*	Signature of Non-Attorney Petition Preparer
X /s/ Donald R. Harris Signature of Attorney for Debtor(s) Donald R. Harris 485340 DC Donald Harris Law Firm 158 Columbus Ave Sandusky, OH 44870-2549 (419) 621-9388 Fax: (419) 239-2313 donharris_dhc@sbcglobal.net	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer
June 3, 2014 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) Address
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Signature Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.
X Signature of Authorized Individual	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.
Date	

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B22A (Official Form 22A) (Chapter 7) (04/13)	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
In re: Aaron, Brunell R. Debtor(s)	☐ The presumption arises☑ The presumption does not arise☐ The presumption is temporarily inapplicable.
Case Number:	
(If known)	

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Veteran's Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

DZZII (Part II. CALCULATION		LY INCO	ME FOR § 707(b)(7) I	EXCLUSION	
	Marital/filing status. Check the box th a. ☐ Unmarried. Complete only Columb. ☐ Married, not filing jointly, with depenalty of perjury: "My spouse an are living apart other than for the Complete only Column A ("Debut Co. ✓ Married, not filing jointly, withou	nn A ("Debtor eclaration of sep d I are legally s purpose of evac tor's Income"	r's Income's parate house separated unding the requipment of the parate of the company of the co	bholds. By checking this beder applicable non-bankru uirements of § 707(b)(2)(A3-11.	ox, debtor declar aptcy law or my (x) of the Bankru	es under spouse and I otcy Code."
2	Column A ("Debtor's Income") d. Married, filing jointly. Complete Lines 3-11. All figures must reflect average monthly the six calendar months prior to filing the	and Column I both Column A v income receive the bankruptcy c	A ("Spouse' A ("Debtor ed from all ase, ending	s Income") for Lines 3-1 's Income") and Column sources, derived during on the last day of the	1.	_
3	month before the filing. If the amount o must divide the six-month total by six, a Gross wages, salary, tips, bonuses, ov	and enter the res	sult on the a		Income \$	Income \$
4	Income from the operation of a busin a and enter the difference in the approprione business, profession or farm, enter a attachment. Do not enter a number less expenses entered on Line b as a deduction	ess, profession riate column(s) aggregate numb than zero. Do n	or farm. S of Line 4. I pers and pro ot include	f you operate more than vide details on an	*	Ψ
7	a. Gross receiptsb. Ordinary and necessary business		\$			
	c. Business income		Subtract I	Line b from Line a	\$	\$
5	Rent and other real property income difference in the appropriate column(s) not include any part of the operating Part V. a. Gross receipts	of Line 5. Do n	ot enter a n	umber less than zero. Do		
	b. Ordinary and necessary operating	expenses	\$			
	c. Rent and other real property inco			Line b from Line a	\$	\$
6	Interest, dividends, and royalties.		1		\$	\$
7	Pension and retirement income.				\$	\$
8	Any amounts paid by another person expenses of the debtor or the debtor's that purpose. Do not include alimony oby your spouse if Column B is complete one column; if a payment is listed in Co	s dependents, i or separate mair ed. Each regular	ncluding cl ntenance pa r payment si	nild support paid for yments or amounts paid nould be reported in only	\$	\$
9	Unemployment compensation. Enter the However, if you contend that unemploy was a benefit under the Social Security Column A or B, but instead state the arm	ment compensa Act, do not list	tion receive the amount	ed by you or your spouse		
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$		Spouse \$	\$	\$

B22A (Offici:	al Form 22A) (Chapter 7) (04/13)						
10	source paid alime Secu	me from all other sources. Specify source and amount. If necessary, less on a separate page. Do not include alimony or separate maintenaby your spouse if Column B is completed, but include all other payony or separate maintenance. Do not include any benefits received unrity Act or payments received as a victim of a war crime, crime against tim of international or domestic terrorism.	nce me	e payments ents of r the Social				
	a.	Pension	\$	1,128.00				
	b.	Pension	\$	1,300.00				
	Tot	al and enter on Line 10			\$	1,128.00	\$	1,300.00
11	l	otal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 1 if Column B is completed, add Lines 3 through 10 in Column B. Enter			\$	1,128.00	\$	1,300.00
12	Line	I Current Monthly Income for § 707(b)(7). If Column B has been con 11, Column A to Line 11, Column B, and enter the total. If Column B beleted, enter the amount from Line 11, Column A.			\$			2,428.00
		Part III. APPLICATION OF § 707(B)(7)	EX(CLUSION	-			
13	1	ualized Current Monthly Income for § 707(b)(7). Multiply the amound enter the result.	ınt f	From Line 12 b	y the	number	\$	29,136.00
14	hous	licable median family income. Enter the median family income for the ehold size. (This information is available by family size at www.usdoj. ankruptcy court.)	_			rk of		
	a. En	tter debtor's state of residence: Ohio b. Ente	r de	ebtor's househ	old si	ze: _2	\$	53,852.00
	Appl	lication of Section 707(b)(7). Check the applicable box and proceed as	dir	ected.				
15		The amount on Line 13 is less than or equal to the amount on Line not arise" at the top of page 1 of this statement, and complete Part VIII:						
	🔲 1	The amount on Line 13 is more than the amount on Line 14. Compl	ete	the remaining	parts	of this sta	teme	ent.

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

		Part IV. CALCULATION OF CURRENT MONTHLY INCOME I	FOR § 707(b)(2)	
16	Ente	r the amount from Line 12.		\$
17	Line debto paym debto	tal adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of an 11, Column B that was NOT paid on a regular basis for the household expenses of the prise of the specific in the lines below the basis for excluding the Column B increase of the spouse's tax liability or the spouse's support of persons other than the deler's dependents) and the amount of income devoted to each purpose. If necessary, list the tents on a separate page. If you did not check box at Line 2.c, enter zero.	he debtor or the ome (such as otor or the	
	a.		\$	
	b.		\$	
	c.		\$	
	Tot	al and enter on Line 17.		\$
18	Curr	ent monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the	result.	\$
		Part V. CALCULATION OF DEDUCTIONS FROM INC	COME	
		Subpart A: Deductions under Standards of the Internal Revenue Se	ervice (IRS)	
19A	Nation information	onal Standards: food, clothing and other items. Enter in Line 19A the "Total" amonal Standards for Food, Clothing and Other Items for the applicable number of personation is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court. For of persons is the number that would currently be allowed as exemptions on your not plus the number of any additional dependents whom you support.	sons. (This) The applicable	\$

Out-of-Pocket Health Care for persons 65 years of a www.usdoj.gov/ust/ or from the clerk of the bankrup persons who are under 65 years of age, and enter in years of age or older. (The applicable number of per category that would currently be allowed as exempti of any additional dependents whom you support.) M persons under 65, and enter the result in Line c1. Mu persons 65 and older, and enter the result in Line c2 amount, and enter the result in Line 19B. Persons under 65 years of age a1. Allowance per person	rs of age ge or old they cour Line b2 sons in eons on yultiply Liltiply Lil	e, and in Line a der. (This infort.) Enter in Lin the applicable each age categour federal inc tine a1 by Line ine a2 by Line nes c1 and c2	a2 the IRS Nation remation is availante b1 the application of person ory is the number of the too obtain a total of age or older per person	nal Standards for ble at able number of ons who are 65 or in that plus the number total amount for otal amount for	
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and Utilities Standards; non-mortgage expenses for tinformation is available at www.usdoj.gov/ust/ or frofamily size consists of the number that would curren	the appliom the classification the application the all	cable county a lerk of the ban lowed as exem	and family size. (kruptcy court). Toptions on your f	This The applicable	\$
the IRS Housing and Utilities Standards; mortgage/r information is available at www.usdoj.gov/ust/ or frofamily size consists of the number that would curren tax return, plus the number of any additional depend the Average Monthly Payments for any debts secure from Line a and enter the result in Line 20B. Do not	ent expe	nse for your collerk of the ban lowed as exemom you suppor ir home, as sta n amount less	ounty and family kruptcy court)(the ptions on your fourt); enter on Line ted in Line 42; s	y size (this he applicable federal income to be the total of	
b. Average Monthly Payment for any debts securany, as stated in Line 42	red by yo	our home, if	\$		
c. Net mortgage/rental expense			Subtract Line b	\$	
and 20B does not accurately compute the allowance	to which	n you are entitl	led under the IRS	S Housing and	\$
an expense allowance in this category regardless of and regardless of whether you use public transportate. Check the number of vehicles for which you pay the expenses are included as a contribution to your hous $0 \ 1 \ 2$ or more. If you checked 0, enter on Line 22A the "Public Transportation. If you checked 1 or 2 or more, enter Local Standards: Transportation for the applicable in Statistical Area or Census Region. (These amounts as	whether ion. operating the contraction on Line umber o	ng expenses or con amount from amount from 22A the "Ope of vehicles in the same of the sam	for which the operation of the set of the se	ting a vehicle perating tandards: nount from IRS etropolitan	\$
	Out-of-Pocket Health Care for persons under 65 year Out-of-Pocket Health Care for persons 65 years of a www.usdoj.gov/ust/ or from the clerk of the bankrup persons who are under 65 years of age, and enter in years of age or older. (The applicable number of per category that would currently be allowed as exempti of any additional dependents whom you support.) M persons under 65, and enter the result in Line c1. Mt persons 65 and older, and enter the result in Line c2. amount, and enter the result in Line 19B. Persons under 65 years of age a1. Allowance per person b1. Number of persons c1. Subtotal Local Standards: housing and utilities; non-mort and Utilities Standards; non-mortgage expenses for tinformation is available at www.usdoj.gov/ust/ or frefamily size consists of the number that would curren tax return, plus the number of any additional depend Local Standards: housing and utilities; mortgage the IRS Housing and Utilities Standards; mortgage/rinformation is available at www.usdoj.gov/ust/ or frefamily size consists of the number that would curren tax return, plus the number of any additional depend the Average Monthly Payments for any debts secure from Line a and enter the result in Line 20B. Do not a. IRS Housing and Utilities Standards; mortgage b. Average Monthly Payment for any debts secure from Line a and enter the result in Line 20B. Do not a. IRS Housing and Utilities Standards; mortgage b. Average Monthly Payment for any debts secure any, as stated in Line 42 c. Net mortgage/rental expense Local Standards: transportation; vehicle operation and expense allowance in this category regardless of wand regardless of whether you use public transportation. If you checked 1 or 2 or more, enter Local Standards: Transportation for the applicable nexpenses are included as a contribution to your hous of the proper of the	Out-of-Pocket Health Care for persons under 65 years of age or ole Out-of-Pocket Health Care for persons 65 years of age or ole www.usdoj.gov/ust/ or from the clerk of the bankruptcy cour persons who are under 65 years of age, and enter in Line b2 years of age or older. (The applicable number of persons in a category that would currently be allowed as exemptions on y of any additional dependents whom you support.) Multiply L persons under 65, and enter the result in Line c1. Multiply L persons 65 and older, and enter the result in Line c2. Add Lia amount, and enter the result in Line 19B. Persons under 65 years of age	Out-of-Pocket Health Care for persons under 65 years of age, and in Line a Out-of-Pocket Health Care for persons 65 years of age or older. (This inforwww.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line persons who are under 65 years of age, and enter in Line b2 the applicable years of age or older. (The applicable number of persons in each age category that would currently be allowed as exemptions on your federal in of any additional dependents whom you support.) Multiply Line a1 by Line persons under 65, and enter the result in Line c1. Multiply Line a2 by Line persons under 65, and enter the result in Line c2. Add Lines c1 and c2 amount, and enter the result in Line 19B. Persons under 65 years of age	Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRSN Natio Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are under 65 years of age and enter in Line b2 the applicable number of persons who are under 65 years of age or older. (The applicable number of persons in each age category is the numbe category that would currently be allowed as exemptions on your federal income tax return, of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a topersons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount, and enter the result in Line 19B. Persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total amount, and enter the result in Line 19B. Persons under 65 years of age a1. Allowance per person b1. Number of persons c1. Subtotal Persons 65 years of age or older a2. Allowance per person b12. Number of persons c2. Subtotal Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of th and Utilities Standards; non-mortgage expenses for the applicable county and family size consists of the number that would currently be allowed as exemptions on your fax return, plus the number of any additional dependents whom you support. Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court/uffamily size consists of the number that would currently be allowed as exemptions on your fax return, plus the number of any additional dependents whom you support); enter on Line the Average Monthly Payments for any debts secu	Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are under 65 years of age are older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a2 by Line b2 to obtain a total amount for persons on under 65, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total amount for persons under 65, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. Persons under 65 years of age

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993-2011 EZ-Filing, Inc. [1-800-
-Filing, Inc.

B22A (Official Form 22A) (Chapter 7) (04/13) Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an 22B additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) \$ Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) \square 1 \square 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; 23 subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. 24 IRS Transportation Standards, Ownership Costs, Second Car Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment 25 taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. \$ Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly 26 payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. \$ Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay 27 for term life insurance for yourself. Do not include premiums for insurance on your dependents, for \$ whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are 28 required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. \$ Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of 29 employment and for education that is required for a physically or mentally challenged dependent child for \$ whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend 30 on childcare — such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not 31 reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.

B22A (Official Form 22A) (Chapter 7) (04/13)		
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service — such as pagers, call waiting, caller id, special long distance, or internet service — to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.	\$	
	Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32		
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.		
	a. Health Insurance \$		
34	b. Disability Insurance \$		
34	c. Health Savings Account \$		
	Total and enter on Line 34	\$	
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:		
	\$		
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$	
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$	
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.	\$	
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$	
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.		
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).		
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40		

\$

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

		S	ubpart C	: Deductions for De	ebt Payment		
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
42		Name of Creditor		Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a. b.				\$	☐ yes ☐ no ☐ yes ☐ no	
	c.			Total: Ac	\$ dd lines a, b and c.	yes no	
	reside you r credi cure forec	er payments on secured claims. ence, a motor vehicle, or other particular in addition to the payments liamount would include any sums losure. List and total any such an eate page.	coperty ne 50th of an sted in Lin in default	cessary for your supy y amount (the "cure ne 42, in order to ma that must be paid in	port or the support of amount") that you mu intain possession of t order to avoid reposs	your dependents, ust pay the he property. The session or	
43		Name of Creditor	e of Creditor Pro		Property Securing the Debt		
	a.					\$	-
	c.				Total: Add	\$ d lines a, b and c.	
44	such	nents on prepetition priority class priority tax, child support and ruptcy filing. Do not include cur	alimony	claims, for which you	u were liable at the tin	me of your	\$
	follo	pter 13 administrative expenses wing chart, multiply the amount in instrative expense.					
	a.	Projected average monthly chap	pter 13 pla	an payment.	\$		
45	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		X			
	c.	Average monthly administrative case	e expense	of chapter 13	Total: Multiply Line and b	es a	\$
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.					\$	
Subpart D: Total Deductions from Income							<u> </u>
47	Tota	l of all deductions allowed und	er § 707(I	o)(2). Enter the total	of Lines 33, 41, and	46.	\$

<i></i>	(Official Form 22A) (Chapter 7) (04/13) Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION	N			
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))		\$		
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))		\$		
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.				
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the numenter the result.	ber 60 and	\$		
	Initial presumption determination. Check the applicable box and proceed as directed.				
	The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does of this statement, and complete the verification in Part VIII. Do not complete the remainded		e top of page 1		
52	The amount set forth on Line 51 is more than \$12,475*. Check the box for "The presumpage 1 of this statement, and complete the verification in Part VIII. You may also complete the remainder of Part VI.				
	The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Complete the 53 though 55).	remainder of I	Part VI (Lines		
53	Enter the amount of your total non-priority unsecured debt		\$		
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.				
	Secondary presumption determination. Check the applicable box and proceed as directed.				
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				
	Part VII. ADDITIONAL EXPENSE CLAIMS				
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, the and welfare of you and your family and that you contend should be an additional deduction from under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All average monthly expense for each item. Total the expenses.	om your curren	t monthly		
	Expense Description	Monthly A	mount		
56	a.	\$			
	b.	\$			
	c.	\$			
	Total: Add Lines a, b and c	\$			
	Part VIII. VERIFICATION				
	I declare under penalty of perjury that the information provided in this statement is true and co both debtors must sign.)	orrect. (If this a	joint case,		
57	Date: June 3, 2014 Signature: /s/ Brunell R. Aaron				
	Date: Signature: (Joint Debtor, if any)				

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

United States Bankruptcy Court Northern District of Ohio

IN RE:	Case No
Aaron, Brunell R.	Chapter 7
Debtor(s)	•
EXHIBIT D - INDIVIDUAL DEBTOR CREDIT COUNSELI	
Warning: You must be able to check truthfully one of the five stado so, you are not eligible to file a bankruptcy case, and the cour whatever filing fee you paid, and your creditors will be able to rand you file another bankruptcy case later, you may be required to stop creditors' collection activities.	t can dismiss any case you do file. If that happens, you will lose esume collection activities against you. If your case is dismissed
Every individual debtor must file this Exhibit D. If a joint petition is fi one of the five statements below and attach any documents as direct	
1. Within the 180 days before the filing of my bankruptcy case the United States trustee or bankruptcy administrator that outlined to performing a related budget analysis, and I have a certificate from the certificate and a copy of any debt repayment plan developed through	the opportunities for available credit counseling and assisted me in agency describing the services provided to me. Attach a copy of the
2. Within the 180 days before the filing of my bankruptcy case the United States trustee or bankruptcy administrator that outlined the performing a related budget analysis, but I do not have a certificate from the agency describing the services provide the agency no later than 14 days after your bankruptcy case is filed.	the opportunities for available credit counseling and assisted me in from the agency describing the services provided to me. You must file the ded to you and a copy of any debt repayment plan developed through
3. I certify that I requested credit counseling services from an app days from the time I made my request, and the following exigent requirement so I can file my bankruptcy case now. [Summarize exig	circumstances merit a temporary waiver of the credit counseling
If your certification is satisfactory to the court, you must still ob	tain the credit counseling briefing within the first 30 days after
you file your bankruptcy petition and promptly file a certificate frof any debt management plan developed through the agency. Fai case. Any extension of the 30-day deadline can be granted only falso be dismissed if the court is not satisfied with your reasons counseling briefing.	lure to fulfill these requirements may result in dismissal of your or cause and is limited to a maximum of 15 days. Your case may
4. I am not required to receive a credit counseling briefing becaus motion for determination by the court.]	e of: [Check the applicable statement.] [Must be accompanied by a
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by of realizing and making rational decisions with respect to final	reason of mental illness or mental deficiency so as to be incapable ancial responsibilities.);
 Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically participate in a credit counseling briefing in person, by teleph Active military duty in a military combat zone. 	impaired to the extent of being unable, after reasonable effort, to none, or through the Internet.);
5. The United States trustee or bankruptcy administrator has deterdoes not apply in this district.	rmined that the credit counseling requirement of 11 U.S.C. § 109(h)
I certify under penalty of perjury that the information provided	above is true and correct.
Signature of Debtor: /s/ Brunell R. Aaron	
Date: June 3, 2014	

Certificate Number: 03621-OHN-CC-023537234



CERTIFICATE OF COUNSELING

I CERTIFY that on June 3, 2014, at 2:53 o'clock PM EDT, Brunell Aaron received from Credit Card Management Services, Inc. d/b/a Debthelper.com, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Ohio, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: June 3, 2014

By: /s/Daynelys Gibbins

Name: Daynelys Gibbins

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

United States Bankruptcy Court Northern District of Ohio

IN RE:		Case No.
Aaron, Brunell R.		Chapter 7
	Debtor(s)	•

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 120,000.00		
B - Personal Property	Yes	3	\$ 8,900.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 80,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$ 14,233.48	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 5,314.00
J - Current Expenditures of Individual Debtor(s)	Yes	4			\$ 5,150.29
	TOTAL	17	\$ 128,900.00	\$ 94,233.48	

United States Bankruptcy Court Northern District of Ohio

IN RE:	Case No.
Aaron, Brunell R.	Chapter 7
Debtor(s)	<u> </u>
STATISTICAL SUMMARY OF CERTAIN LIABILITIES	AND DELATED DATA (28 H S.C. \$ 150)

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 12)	\$ 5,314.00
Average Expenses (from Schedule J, Line 22)	\$ 5,150.29
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C	
Line 20)	\$ 2,428.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 14,233.48
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 14,233.48

R6A	(Official	Form	6A)	(12/07)
BOA	(Official	Form	6A)	(12/0)

IN RE Aaron, Brunell R.

1	Dρ	ht	or	(s

Case	No.

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Residence at:	JTWROS	J	120 000 00	80,000.00
605 52nd St	JIWKOS	J	120,000.00	80,000.00
Sandusky, OH 44870-4929				

ΓΟΤΑL

120,000.0

(Report also on Summary of Schedules)

Case No. ____

(If known)

SCHEDULE B - PERSONAL PROPERTY

Debtor(s)

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.	Х			
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account Citizens banking company	W	200.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		assoretd household goods, including but not limited to: dresser, chairs, kitchen table, bed, couch, coffee table etc.	W	5,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		personal wearing apparel	W	2,500.00
7.	Furs and jewelry.		personal jewelry	W	1,200.00
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Х			
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			

Coco	NΙ	
Case	No.	

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	Х			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	Х			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	x			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	Х			

IN RE Aaron, Brunell R.

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Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

35. Other personal property of any kind not already listed. Itemize.	X			
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION

0 continuation sheets attached

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

Page 19 of 45

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Debtor(s)

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects	the exemptions	to which	debtor i	is entitled	under:
(Check one box)					

Check if debtor claims a homestead exemption that exceeds \$155,675. *

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY Residence at: 605 52nd St	R.C. § 2329.66(A)(1a)(b)	40,000.00	
Sandusky, OH 44870-4929			
SCHEDULE B - PERSONAL PROPERTY			
Checking Account Citizens banking company	R.C. § 2329.66(A)(3)	200.00	200.00
assoretd household goods, including but not limited to: dresser, chairs, kitchen table, bed, couch, coffee table etc.	R.C. § 2329.66(A)(4)(a)	1,500.00	5,000.00
personal wearing apparel	R.C. § 2329.66(A)(3)	2,500.00	2,500.00
personal jewelry	R.C. § 2329.66(A)(4)(b)	400.00	1,200.00

^{*} Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Debtor(s)

Case No.

(If known)

Schedules)

Summary of Certain Liabilities and Related

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0359024296	Х	J	Joint Home Mortageg				80,000.00	
Ocwen Loan Servicing LLC Attention Bankrupcty Dept 1661 Worthington Rd Ste 100 West Palm Beach, FL 33409-6493			VALUE \$ 120,000.00					
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.								
			VALUE \$					
0 continuation sheets attached			(Total of th		tota		\$ 80,000.00	\$
			(Use only on la		Γota age		\$ 80,000.00	-
							(Report also on	(If applicable, report

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Debtor(s)

Case No. _____(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

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liste	Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority and on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data.
V	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.
	o continuation sheets attached

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R6F	(Official	Form	6F)	(12/07)

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Debtor(s)

Case	No	
Case	INO.	

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			signature loan		
Advance America 4920 Milan Rd Ste C Sandusky, OH 44870-5899					698.30
ACCOUNT NO.			signature loan		
Cashland 17 Triangle Park Dr Cincinnati, OH 45246-3411					1,226.00
ACCOUNT NO.			signature loan	1	<u> </u>
Check Into Cash Perkins Ave Sandusky, OH 44870					678.00
ACCOUNT NO.			signature loan	1	
Check N'Go 7755 Montgomery Rd Ste 400 Cincinnati, OH 45236-4197					6,400.00
1 continuation sheets attached			Subto (Total of this pag		\$ 9,002.30
			To (Use only on last page of the completed Schedule F. Report also the Summary of Schedules and, if applicable, on the Statistic Summary of Certain Liabilities and Related Date	on cal	\$

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Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		((Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:	П		П	
Check'nGo 3104 Milan Road Sandusky, OH 44870			Check N'Go				
ACCOUNT NO.		w	signature loan				
Check Smart 4816 Milan Road Sandusky, OH 44870							1,150.00
ACCOUNT NO.		w	Revolving credit card charges incurred over the				,
Discover FincI Services PO Box 15316 Wilmington, DE 19850-5316			past several years.				2,862.18
ACCOUNT NO.			Assignee or other notification for:			Н	2,002.10
Discover FincI Services PO Box 6103 Carol Stream, IL 60197-6103			Discover Fincl Services				
ACCOUNT NO.		w	signature loan	Н		Н	
First America 121 South 5th Street Fremont, OH 43420							1,219.00
ACCOUNT NO.	_						1,210.00
ACCOUNT NO.							
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		· · · · ·	(Total of th	Sub is p			\$ 5,231.18
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	T tals tatis	ota o o tica	al n	\$ 14,233.48

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(If known)

Debtor(s)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

R6H	(Official	Form 6H)	(12/07)
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Case	No
Case	INO.

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
niel Aaron	Ocwen Loan Servicing LLC
5 52nd Street	Attention Bankrupcty Dept 1661 Worthington Rd Ste 100
indusky, OH 44870	1661 Worthington Rd Ste 100
illuusky, Oli 44070	West Polm Book El 22400 6402
	West Palm Beach, FL 33409-6493

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Fill in this information to identify	your case:				
Debtor 1 Brunell R. Aaron					
First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: I	Northern District of Ohio				
Case number			Check if this	is:	
(If known)			☐ An amen	ded filing	
				ment showing post-petition 3 income as of the followi	
Official Form 6I			MM / DD /	YYYY	
Schedule I: You	ır Income				12/13
Be as complete and accurate as posupplying correct information. If you follow the separated and your spouseparate sheet to this form. On the Part 1: Describe Employment	ou are married and not fil se is not filing with you, top of any additional pa	ing jointly, and your spouse is do not include information abo	living with you, ut your spouse	include information about . If more space is needed, a	your spouse. attach a
 Fill in your employment information. 		Debtor 1		Debtor 2 or non-filing spo	ouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ✓ Not employed		☐ Employed Not employed	
Include part-time, seasonal, or self-employed work.		Retired	1	Retired	
Occupation may Include student or homemaker, if it applies.	Occupation	<u>Neureu</u>	<u> </u>	renien	
	Employer's name				

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

Number Street

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

Employer's address

How long employed there?

3 + \$ 0.00

2.

4.

For Debtor 1

0.00

ZIP Code

\$<u>0.00</u>

non-filing spouse

For Debtor 2 or

Number

City

Street

State ZIP Code

+\$<u>0.00</u> + \$<u>0.00</u>

4. Calculate gross income. Add line 2 + line 3.

\$<u>0.00</u> \$<u>0.00</u>

Official Form 6l Schedule I: Your Income page 1

Last Name

Case number (if known)_

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			Fo	r Debtor 1			Debtor 2 or filing spou			
Co	py line 4 here	4.	\$_	0.00		\$	0.00			
l ie	t all payroll deductions:									
		_				•				
	a. Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	-	\$ <u>_</u>	0.00			
	o. Mandatory contributions for retirement plans	5b.	\$_	0.00	_	\$ <u>_</u>	0.00	_		
50	c. Voluntary contributions for retirement plans	5c.	\$_	0.00	_	\$_	0.00			
50	d. Required repayments of retirement fund loans	5d.	\$_	0.00	_	\$_	0.00	_		
56	e. Insurance	5e.	\$_	0.00	_	\$_	0.00			
5f	. Domestic support obligations	5f.	\$_	0.00	_	\$_	0.00			
50	g. Union dues	5g.	\$_	0.00	_	\$_	0.00			
5ł	n. Other deductions. Specify:	5h.	+\$_	0.00	_	+ \$_	0.00			
6. A	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$_	0.00	_	\$_	0.00			
7. C i	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	_	\$_	0.00			
. Lis	st all other income regularly received:									
88	a. Net income from rental property and from operating a business, profession, or farm									
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	_	\$_	0.00			
8	b. Interest and dividends	8b.	\$	0.00		\$	0.00			
	c. Family support payments that you, a non-filing spouse, or a depende regularly receive		Ψ_		=	· -				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	_	\$_	0.00			
80	d. Unemployment compensation	8d.	\$_	0.00	_	\$_	0.00			
8	e. Social Security	8e.	\$_	1,386.00	_	\$_	1,500.00			
8	f. Other government assistance that you regularly receive									
	Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	се	\$_	0.00	-	\$_	0.00			
	Specify:	8f.								
8	g. Pension or retirement income	8g.	\$_	1,128.00	_	\$_	1,300.00			
8	h. Other monthly income. Specify:	8h.	+\$_	0.00	_	+\$_	0.00			
. A	dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	2,514.00		\$_	2,800.00			
	Iculate monthly income. Add line 7 + line 9. In the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	2,514.00	+	\$	2,800.00	=	\$	5,314.
. Sta	ate all other regular contributions to the expenses that you list in Scheo	dule J			_					
Inc	clude contributions from an unmarried partner, members of your household, your friends or relatives.			ents, your ro	omm	ates,	and			
Do	not include any amounts already included in lines 2-10 or amounts that are	not av	ailabl	e to pay expe	nses	listed	d in <i>Schedui</i>	e J.		
Sp	ecify:					-		11. +	\$	0.
. Ad	ld the amount in the last column of line 10 to the amount in line 11. The	result	is the	combined m	onth	ly inco	ome.			
	rite that amount on the Summary of Schedules and Statistical Summary of Co					-		12.	\$	5,314.
										nbined
	o you expect an increase or decrease within the year after you file this f	orm?							mor	nthly inco
	Yes. Explain: None									

Fill in this informatio	n to identify y	our case:				
Debtor 1 Brunell First Name	R. Aaron	Middle Name Last Name	Chec	ck if this is:		
Debtor 2 (Spouse, if filing) First Name		Middle Name Last Name		n amended fi	ling	
United States Bankruptcy	Court for the: No					petition chapter 13
Case number	Court for the TV	State of State	_		f the following —	date:
(If known)				M / DD / YYYY separate filin		because Debtor 2
Official Form	6J				parate househ	
Schedule	J: You	ır Expenses				12/13
•	oace is neede	ssible. If two married people are fili d, attach another sheet to this form				-
Part 1: Describ	e Your Hous	sehold				
1. Is this a joint case?						
✓ No. Go to line 2.☐ Yes. Does Debto	r 2 live in a se	eparate household?				
☐ No ☐ Yes. Del	otor 2 must file	a separate Schedule J.				
2. Do you have depend	dents?	☑No	Donandant's relationship	to.	Donandant's	Doos dependent live
Do not list Debtor 1 a Debtor 2.	nd	Yes. Fill out this information for each dependent	Dependent's relationship Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Do not state the dependence.	endents'					☐ No ☐ Yes
names.						□ No
						☐ Yes
						☐ No ☐ Yes
						□ No
						☐ Yes
						□ No
3. Do your expenses in	nclude					∐ Yes
expenses of people yourself and your de	other than	V No □Yes				
Part 2: Estimate	Your Ongoir	ng Monthly Expenses				
	-	pankruptcy filing date unless you a			-	•
expenses as of a date applicable date.	after the bank	cruptcy is filed. If this is a supplement	ental <i>Schedule J</i> , check t	he box at the t	top of the form	and fill in the
	for with non-	cash government assistance if you	know the value of			
such assistance and h	ave included	it on Schedule I: Your Income (Offi	cial Form 6l.)		Your exper	nses
 The rental or home any rent for the grou 	-	penses for your residence. Include	first mortgage payments a	and 4.	\$7	763.29
If not included in li	ne 4:					
4a. Real estate tax				4a.		100.00
, ,		nter's insurance		4b.		39.00
		nd upkeep expenses		4c.	-	200.00
4d. Homeowner's	association or	condominium dues		4d.	\$	0.00

Official Form 6J Schedule J: Your Expenses page 1

			Your	expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	450.00
	6b. Water, sewer, garbage collection	6b.	\$	75.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	125.00
	6d. Other. Specify: Cable And Internet	6d.	\$	228.00
7.	Food and housekeeping supplies	7.	\$	550.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	225.00
10.	Personal care products and services	10.	\$	100.00
11.	Medical and dental expenses	11.	\$	350.00
12.		12.	\$	370.00
40			œ.	120.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	125.00
14.	Charitable contributions and religious donations	14.	\$	125.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	50.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	80.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Property Taxes	16.	\$	200.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	700.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: See Schedule Attached	17c.	\$	300.00
	17d. Other. Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.	•	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Official Form 6J Schedule J: Your Expenses page 2

22.	\$	5,150.29
00		
23a. 23b. 23c.	\$ -\$ \$	5,314.00 5,150.29 163.71
	23c.	23c. \$

	IN	\mathbf{RE}	Aaron.	Brunell	R.
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Case No. _

Debtor(s)

${\bf SCHEDULE\ J\ -\ CURRENT\ EXPENDITURES\ OF\ INDIVIDUAL\ DEBTOR(S)}$

Continuation Sheet - Page 1 of 1

Other Installment Payments (DEBTOR)

Capital One 100.00
Capital One 100.00
Capital One 100.00
Capital One 100.00

Cana	N	r
Case	11	() .

Debtor(s)

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ 19 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: June 3, 2014 Signature: /s/ Brunell R. Aaron Brunell R. Aaron _ Signature: __ (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the ___ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Signature:

United States Bankruptcy Court Northern District of Ohio

IN F	RE:	Case No.
Aaro	on, Brunell R.	Chapter 7
	Debtor(s)	•
	STATEMENT OF FIN	ANCIAL AFFAIRS
is cor is file farme perso	mbined. If the case is filed under chapter 12 or chapter 13, a married debte ed, unless the spouses are separated and a joint petition is not filed. An in- er, or self-employed professional, should provide the information requeste anal affairs. To indicate payments, transfers and the like to minor children	tion may file a single statement on which the information for both spouses or must furnish information for both spouses whether or not a joint petition individual debtor engaged in business as a sole proprietor, partner, family don this statement concerning all such activities as well as the individual's , state the child's initials and the name and address of the child's parent or use the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).
25. If		we been in business, as defined below, also must complete Questions 19 - ed "None." If additional space is needed for the answer to any question, number (if known), and the number of the question.
	DEFINIT	IONS
for the an off partner form	the purpose of this form if the debtor is or has been, within six years immer ficer, director, managing executive, or owner of 5 percent or more of the er, of a partnership; a sole proprietor or self-employed full-time or part-timer if the debtor engages in a trade, business, or other activity, other than as an exister." The term "insider" includes but is not limited to: relatives of the hand the debtor is an officer, director, or person in control; officers, director.	ebtor is a corporation or partnership. An individual debtor is "in business" diately preceding the filing of this bankruptcy case, any of the following: voting or equity securities of a corporation; a partner, other than a limited me. An individual debtor also may be "in business" for the purpose of this a employee, to supplement income from the debtor's primary employment. debtor; general partners of the debtor and their relatives; corporations of ors, and any persons in control of a corporate debtor and their relatives; the debtor 11 LUS C. 8 101(2) (21)
affilia	ates of the debtor and insiders of such affiliates; any managing agent of t	he debtor. 11 U.S.C. § 101(2),(31).
1. In	come from employment or operation of business	
None	including part-time activities either as an employee or in independent t case was commenced. State also the gross amounts received during maintains, or has maintained, financial records on the basis of a fisca beginning and ending dates of the debtor's fiscal year.) If a joint petition	byment, trade, or profession, or from operation of the debtor's business, rade or business, from the beginning of this calendar year to the date this the two years immediately preceding this calendar year. (A debtor that I rather than a calendar year may report fiscal year income. Identify then is filed, state income for each spouse separately. (Married debtors filing ther or not a joint petition is filed, unless the spouses are separated and a
	AMOUNT SOURCE	
	24,000.00 2012 Gross Income retirement benefits	
	24,000.00 2013 Gross Income Retirement benefits 12,200.00 2012 YTD gross income	
	<u> </u>	
	come other than from employment or operation of business	
None	two years immediately preceding the commencement of this case. G	ployment, trade, profession, operation of the debtor's business during the ive particulars. If a joint petition is filed, state income for each spouse state income for each spouse whether or not a joint petition is filed, unless
	yments to creditors plete a. or b., as appropriate, and c.	
None	debts to any creditor made within 90 days immediately preceding the constitutes or is affected by such transfer is less than \$600. Indicate with a domestic support obligation or as part of an alternative repayment	payments on loans, installment purchases of goods or services, and other ommencement of this case unless the aggregate value of all property that the an asterisk (*) any payments that were made to a creditor on account of schedule under a plan by an approved nonprofit budgeting and credit 13 must include payments by either or both spouses whether or not a joint not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT AMOUNT PAID STILL OWING

		may 2014 700.00		
None	b. Debtor whose debts are not primarily consumer preceding the commencement of the case unless \$6,255.* If the debtor is an individual, indicate wobligation or as part of an alternative repayment so debtors filing under chapter 12 or chapter 13 must is filed, unless the spouses are separated and a joint of the property of the proper	the aggregate value of all proper pith an asterisk (*) any payments thedule under a plan by an approvent at include payments and other tra	erty that constitutes or is a that were made to a credit yed nonprofit budgeting an	ffected by such transfer is less than or on account of a domestic support d credit counseling agency. (Married
	* Amount subject to adjustment on 4/01/16, and e	very three years thereafter with	respect to cases commence	ed on or after the date of adjustment.
None	c. All debtors: List all payments made within one who are or were insiders. (Married debtors filing a joint petition is filed, unless the spouses are sep	under chapter 12 or chapter 13 n	nust include payments by e	
4. Su	ts and administrative proceedings, executions, a	garnishments and attachments		
None	a. List all suits and administrative proceedings to bankruptcy case. (Married debtors filing under ch not a joint petition is filed, unless the spouses are	napter 12 or chapter 13 must inc	lude information concernit	
None	b. Describe all property that has been attached, gathe commencement of this case. (Married debtors or both spouses whether or not a joint petition is	s filing under chapter 12 or chap	oter 13 must include inforr	nation concerning property of either
5. Re	possessions, foreclosures and returns			
None	List all property that has been repossessed by a cr the seller, within one year immediately preceding include information concerning property of either joint petition is not filed.)	g the commencement of this cas	e. (Married debtors filing	under chapter 12 or chapter 13 must
6. As	signments and receiverships			
None	a. Describe any assignment of property for the ber (Married debtors filing under chapter 12 or chapter unless the spouses are separated and joint petition	r 13 must include any assignmen		
None	_ c. 22st an property which has been in the mands of a basic damp of the property appointed of the property problems are			
7. Gi	its			
None	List all gifts or charitable contributions made with gifts to family members aggregating less than \$200 per recipient. (Married debtors filing under chapte a joint petition is filed, unless the spouses are sep	0 in value per individual family r er 12 or chapter 13 must include	nember and charitable cont gifts or contributions by e	ributions aggregating less than \$100
OR C	E AND ADDRESS OF PERSON RGANIZATION Jerusalm Baptist Church	RELATIONSHIP TO DEBTOR, IF ANY member	DATE OF GIFT monthly	DESCRIPTION AND VALUE OF GIFT

8. Losses

1920 Eddy Henry Way Sandusky, OH 44870

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

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None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

List all property owned by another person that the debtor holds or controls.



15. Prior address of debtor

None If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

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None	b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate
	the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 \checkmark

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: June 3, 2014	Signature /s/ Brunell R. Aaron	
	of Debtor	Brunell R. Aaron
Date:	Signature	
	of Joint Debtor	
	(if any)	
	•	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

0 continuation pages attached

United States Bankruptcy Court Northern District of Ohio

N RE:			Case No
Aaron, Brunell R.		Chapter 7	
	Debtor(s)	AD COOK OF A CHIEN ACTION	NT OF INTENTION
	INDIVIDUAL DEBTO		
PART A – Debts secured by property of estate. Attach additional pages if necess		r fully completed for	EACH debt which is secured by property of the
Property No. 1			
Creditor's Name: Ocwen Loan Servicing LLC		Describe Property Securing Debt: Residence at:	
Property will be (check one): ☐ Surrendered			
If retaining the property, I intend to (c) Redeem the property Reaffirm the debt Other. Explain	Reaffirm the debt		example, avoid lien using 11 U.S.C. § 522(f)).
Property is (check one): ✓ Claimed as exempt Not claim	ned as exempt		
Property No. 2 (if necessary)]	
Creditor's Name:		Describe Property Securing Debt:	
Property will be (check one): Surrendered Retained			
If retaining the property, I intend to (characteristic) Redeem the property Reaffirm the debt Other. Explain	neck at least one):	(for	example, avoid lien using 11 U.S.C. § 522(f)).
Property is (check one): Claimed as exempt Not claim	ned as exempt		
PART B – Personal property subject to undditional pages if necessary.)	nexpired leases. (All three c	olumns of Part B mi	ust be completed for each unexpired lease. Attach
Property No. 1			
Lessor's Name:	Describe Leased	Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No
Property No. 2 (if necessary)			
Lessor's Name:	Describe Leased	Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No
continuation sheets attached (if any	')		,
declare under penalty of perjury the personal property subject to an unexp		intention as to any	property of my estate securing a debt and/or
Date: June 3, 2014	/s/ Brunell R. Aaron	1	
	Signature of Debtor		

Signature of Joint Debtor

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

B201A (Form 201A) (11/12) Page 2

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$46 administrative fee: Total fee \$1213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy forms.html#procedure.

United States Bankruptcy Court Northern District of Ohio

IN RE:	Case No
Aaron, Brunell R.	Chapter 7
Debtor(s)	• -

	N OF NOTICE TO CONSUMER DEE 342(b) OF THE BANKRUPTCY COD	
Certificate of [N	Non-Attorney] Bankruptcy Petition Pro	eparer
I, the [non-attorney] bankruptcy petition preparer s notice, as required by § 342(b) of the Bankruptcy (at I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petit Address:	peti the prin the	ial Security number (If the bankruptcy tion preparer is not an individual, state Social Security number of the officer, cipal, responsible person, or partner of bankruptcy petition preparer.)
X		quired by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of office partner whose Social Security number is provided		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have receive	red and read the attached notice, as required by	by § 342(b) of the Bankruptcy Code.
Aaron, Brunell R.	X /s/ Brunell R. Aaron	6/03/2014
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	x	
	Signature of Joint Debto	or (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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United States Bankruptcy Court Northern District of Ohio

IN	RE:		Case No
Aa	aron, Brunell R.		Chapter 7
	Debtor	(s)	
	DISCLOSURE OF	COMPENSATION OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 one year before the filing of the petition in bankruptcy, of or in connection with the bankruptcy case is as follows:	or agreed to be paid to me, for services rendered or to	med debtor(s) and that compensation paid to me within be rendered on behalf of the debtor(s) in contemplation
	For legal services, I have agreed to accept		\$8 54.00
	Prior to the filing of this statement I have received		\$ 250.00
	Balance Due		s <u>604.00</u>
2.	The source of the compensation paid to me was: $\mathbf{V}_{\mathbf{I}}$	Debtor Other (specify):	
3.	The source of compensation to be paid to me is:	Debtor Other (specify):	
4.	I have not agreed to share the above-disclosed com	pensation with any other person unless they are member	ers and associates of my law firm.
		nsation with a person or persons who are not members	or associates of my law firm. A copy of the agreement,
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects of the bankruptcy case	e, including:
	b. Preparation and filing of any petition, schedules, s	dering advice to the debtor in determining whether to f tatement of affairs and plan which may be required; litors and confirmation hearing, and any adjourned hear ngs and other contested bankruptey matters;	
6.	By agreement with the debtor(s), the above disclosed fe	te does not include the following services:	
1	certify that the foregoing is a complete statement of any a proceeding.	CERTIFICATION agreement or arrangement for payment to me for repres	entation of the debtor(s) in this bankruptcy
	June 3, 2014	/s/ Donald R. Harris	
-	Date	Donald R. Harris 485340 DC Donald Harris Law Firm 158 Columbus Ave Sandusky, OH 44870-2549 (419) 621-9388 Fax: (419) 239-2313 donharris_dhc@sbcglobal.net	

United States Bankruptcy Court Northern District of Ohio

IN RE:		Case No.
Aaron, Brunell R.		Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDITOR	MATRIX
The above named debtor(s) hereby	verify(ies) that the attached matrix listing	creditors is true to the best of my(our) knowledge.
Date: June 3, 2014	Signature: /s/ Brunell R. Aaron	
	Brunell R. Aaron	Debtor
Date:	Signature:	

Joint Debtor, if any

Advance America 4920 Milan Rd Ste C Sandusky, OH 44870-5899

Cashland 17 Triangle Park Dr Cincinnati, OH 45246-3411

Check Into Cash Perkins Ave Sandusky, OH 44870

Check N'Go 7755 Montgomery Rd Ste 400 Cincinnati, OH 45236-4197

Check Smart 4816 Milan Road Sandusky, OH 44870

Check'nGo 3104 Milan Road Sandusky, OH 44870

Daniel Aaron 605 52nd Street Sandusky, OH 44870

Discover Fincl Services PO Box 6103 Carol Stream, IL 60197-6103

Discover Fincl Services PO Box 15316 Wilmington, DE 19850-5316 First America 121 South 5th Street Fremont, OH 43420

Ocwen Loan Servicing LLC Attention Bankrupcty Dept 1661 Worthington Rd Ste 100 West Palm Beach, FL 33409-6493